

AUTHORIZATION FOR ELECTRONIC SIGNATURE

FOR SASP GRANT APPLICATION/CONTRACT

I _____ (name) attest that I am the authorized official to sign the SASP Application/Contract. I acknowledge that I have read and understand the SASP Program Plan as outlined according to the attached contract.

By signing this document, I acknowledge that I agree to the SASP Application/Contract and I authorize _____ to electronically sign the SASP Application/Contract.

Authorized Official Name

Title of Authorized Official

Authorized Official Signature

Date of Signature